

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

10/523796

1 Date of Request: _____

2 Serial/Patent # _____

3 Please refund the following fee(s):

4 PAPER
NUMBER

5 DATE
FILED

6 AMOUNT

Filing

18 Feb 85

\$ 500

Amendment

\$

Extension of Time

\$

Notice of Appeal/Appeal

\$

Petition

\$

Issue

\$

Cert of Correction/Terminal Disc.

\$

Maintenance

\$

Assignment

\$

Other

\$

7 TOTAL AMOUNT
OF REFUND

\$ 500

8 TO BE REFUNDED BY:

10 REASON:

Treasury Check

☒ Overpayment

☒ Credit Deposit A/C #:

☐ Duplicate Payment

9 22 -- 0 26 1

☐ No Fee Due (Explanation):

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME:

TITLE:

SIGNATURE: J. Keenwell

PHONE:

OFFICE:

THIS SPACE RESERVED FOR FINANCE USE ONLY:

APPROVED: _____

DATE: _____

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: